

# CLAIMS ONLY

Application Number

10 688630

Filing Date

4-30-4

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
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47						
48						
49						
50			1			
Total Indep						
Total Depend						
Total Claims						

  

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
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95						
96						
97						
98						
99						
100						
Total Indep						
Total Depend	4					
Total Claims	5					